

## **Application Data Sheet**

### **Application Information**

Application number::  
Filing Date:: 08/15/03  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R??::  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: Combination Therapy for Controlling Appetites  
Attorney Docket Number:: 02307E-125510US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 21  
Small Entity?:: Yes  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One:: DA 12413, DA12447 and DA12653  
Secrecy Order in Parent Appl.:: No

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Daniele  
Middle Name::  
Family Name:: Piomelli  
Name Suffix::  
City of Residence:: Irvine  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address::  
City of Mailing Address:: Irvine  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Spain  
Status:: Full Capacity  
Given Name:: Fernando  
Middle Name:: Rodriguez  
Family Name:: de Fonseca  
Name Suffix::  
City of Residence:: Madrid  
State or Province of Residence::  
Country of Residence:: Spain  
Street of Mailing Address::  
City of Mailing Address:: Madrid  
State or Province of mailing address::

Country of mailing address:: Spain

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Peoples Republic of China

Status:: Full Capacity

Given Name:: Jin

Middle Name::

Family Name:: Fu

Name Suffix::

City of Residence:: Irvine

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address::

City of Mailing Address:: Irvine

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Italy

Status:: Full Capacity

Given Name:: Silvana

Middle Name::

Family Name:: Gaetani

Name Suffix::

City of Residence:: Irvine

State or Province of Residence:: CA

Country of Residence:: US

Street of Mailing Address::

City of Mailing Address:: Irvine

State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address::

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/405,047	08/20/2002

### **Assignee Information**

Assignee Name::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::